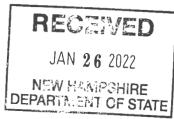


STATE OF NEW HAMPSHIRE 2021 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT



I. Name of Lobbyist(s) Mallory Nugent

II. Name of lobbyist's partnership, firm or corporation, if any:

Everytown for Gun Safe	ty Action Fund		
(Name of partnership, fi	· · · · · · · · · · · · · · · · · · ·		
P.O. Box 41	84 New York	NY	10163
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
646 324-8250	917, 410-6932	e-mail lobbyreg@	everytown.org
(Telephone)	(Fax)	0 man	
III. This statement covers: (Choose or reportable expense transactions whic			7 file a separate report
All reportable transactions occurring	g in the months prior to the rep	orting date relative to the	following client:
Everytown for Gun Safe	ty Action Fund		
	ient as it appears on the Lobbyist F	Registration Form)	
OR All reportable transactions by the lob unrelated to any particular client.	obyist (including the lobbyist's	family), or the lobbying	firm listed below which
IV. Date of Report April 28, 2021 Reports cover: activity from date of reg		July 28, 2021	
October 27, 20 activity from 7/1/2.		January 26, 2022	21
V. There have been no fees receive If this box is checked, complete just this State House, Room 204, Concord, NH (form and submit it to the Secre		
VI. Check if additional reports are at	tached:		
If you have received fees or made e	xpenditures, you must file Add	lendum A- Fees and Exp	oenses
If you have paid an honorarium or r Expense Reimbursement	eimbursed expenses, you must	file Addendum B- Repo	ort of Honorariums or
\checkmark If you, your firm, or your family ha	s made political contributions.	vou must file Addendum	C – Political Contribut
	*	·	
Sworn Statement/Affirmation by Lob I have read RSA 15, RSA 15-B, RSA 14 and complete to the best of my knowled	4-C and RSA 664 and hereby s	wear or affirm that the fo	regoing information is t
Mallory I Nugent (Jan 20, 2022 10:26 EST)		Jan 26, 2022	
(Signature of lobbyist)		(Date))
Mallory Nugent			
(Print Name of lobbyist)			



STATE OF NEW HAMPSHIRE Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

d) \$ no fees received

_{b) \$} 62.66

c) \$ 21,229.05

I. Name of Lobbyist(s) Mallory Nugent P L II. Name of lobbyist's partnership, firm or corporation, if any: E Everytown for Gun Safety Action Fund A S (Name of partnership, firm or corporation) E III. Name of Client Everytown for Gun Safety Action Fund Date 1/24/2022 P R I **IV. Fees Received** N Indicate the gross amount of all fees received from the client identified above that are related, directly or indirectly, Т to lobbying, including fees for services such as public advocacy, government relations, or public relations services including research, monitoring legislation, and related legal work. The gross fee amount reported shall not be reduced by any expenses: a) \$ no fees received a) Total of all fees received in this reporting period b) \$ no fees received b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year) c) Total of all fees received to date c) \$ no fees received (Add lines a and b)

d) Indicate the amount of any such fees that are due, but have not yet been paid

V. Expenses:

Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to report all expenses made from lobbying fees. Separate reports are to be filed for expenditures made relative to each client and if expenditures are made by the lobbyist(s)/firm that are unrelated to any one client a separate report may be filed for the lobbyist(s)/firm. Expenses are to be reported in one of three categories of expenses: (a) the aggregate total of all expenses paid during the reporting period for salaries, benefits, support staff, and office expenses; (b) the aggregate total of all individual expenses where the expenditure was of \$25.00 or less (for example: meals purchased during a business lunch where the cost was \$25.00 or less, purchase of a pen with a value of less than \$10 that is given to the person being lobbied, purchase of a ceremonial object given to a person being lobbied with a value of \$25.00 or less); and (c) an itemized statement of each individual expenditure made during this reporting period of greater than \$25.00 for any purpose not covered by (a) (for example: purchase of a meal with value of greater than \$25, purchase of a ceremonial object of lobbying with a value greater than \$25, but not greater than \$50, restaurant expenses for a legislative reception). Expenses for honorariums, expense reimbursement, or political contributions will be reported on separate addendums and should not be reported on Addendum A.

a) Total aggregate expenses for this reporting period for salaries, benefits,	311 51
support staff, and office expenses, related directly or indirectly to lobbying.	_{a) \$} 341.54

b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.

c) Total of all itemized expenditures reported in detail in section VI.

d) Total expenses for this reporting period (Add lines a, b and c)	_{d) §} <u>21,633.25</u>
	e) § <u>66,368.62</u>
	_{f) \$} 88,001.87

VI. Other Expenses:

Provide the following detail for all expenditures of more than \$25 made from lobbying fees during this reporting period, including by whom paid or to whom charged.

Paid to:	Amount:
Demers & Prasol, Inc.	_{\$} 5,000.00
Demers & Prasol, Inc.	\$ 8,000.00
Demers & Prasol, Inc.	s 8,000.00
Budget Rent a Car	\$ 99.93
Residence Inn	s <u>129.12</u>
	\$

Sworn Statement/Affirmation by Lobbyist

I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.

Ne registre de la Statemente

(Signature of lobbyist)

Jan 26, 2022

(Date)

Mallory Nugent

(Print Name of lobbyist)

	STATE OF NEW HAMPS Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)	
I. Name of Lobbyist(s) Ma	llory Nugent	
II. Name of lobbyist's part	mership, firm or corporation, if any:	
Everytown for Gun Sa	fety Action Fund	
	nership, firm or corporation)	
III. Name of Client Every	town for Gun Safety Action Fund	ate 1/24/2022
	ion that is reportable pursuant to RSA Chapter 66 g firm, indicate the following:	4 paid on behalf of the
Full name of candidate: N	Iew Hampshire Democratic Party (Last Name) (First Name)	(Middle Name/Initial)
Amount of contribution \$ 1,	000.00 Office Candidate is Seeking N/	A
If the contribution is an in-kin	d contribution, provide a description of the goods or se ribution on the line above for amount of contribution.	rvices provided, and enter the
If the contribution is an in-kin actual cost of the in-kind cont enter an estimated value and t	ad contribution, provide a description of the goods or se ribution on the line above for amount of contribution. I he word "estimate."	rvices provided, and enter the
If the contribution is an in-kin actual cost of the in-kind cont	ad contribution, provide a description of the goods or se ribution on the line above for amount of contribution. I he word "estimate."	rvices provided, and enter the
If the contribution is an in-kin actual cost of the in-kind cont enter an estimated value and t	ad contribution, provide a description of the goods or se ribution on the line above for amount of contribution. I he word "estimate."	rvices provided, and enter the If the actual cost is not known,
If the contribution is an in-kin actual cost of the in-kind cont enter an estimated value and t 	d contribution, provide a description of the goods or se ribution on the line above for amount of contribution. I he word "estimate." (Last Name) (First Name) Office Candidate is Seeking d contribution, provide a description of the goods or se ribution on the line above for amount of contribution. I	rvices provided, and enter the If the actual cost is not known (Middle Name/Initial)
If the contribution is an in-kin actual cost of the in-kind cont enter an estimated value and t 	d contribution, provide a description of the goods or seribution on the line above for amount of contribution. The word "estimate." (Last Name) (First Name) (Iast Name) (First Name) (First Name) (Iast Name) (First Name) (First Name) (Iast Name) (First Name) (First Name) (First Name) (Iast Name) (First Name) (Fir	rvices provided, and enter the If the actual cost is not known (Middle Name/Initial)

(turn over to continue \rightarrow)

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."

(If more than three contributions were made, report additional contributions on separate addendum C forms.)

Sworn Statement/Affirmation by Lobbyist

I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.

Mellintis hispes fillari zo. 2003 bolzest ST

Jan 26, 2022

(Date)

(Signature of lobbyist)

Mallory Nugent (Print Name of lobbyist)

EGSAF - NH Q4 2021 Lobbying Report (Draft)

Final Audit Report

2022-01-26

Created:	2022-01-25
Ву:	Liz Ingles (lingles@everytown.org)
Status:	Signed
Transaction ID:	CBJCHBCAABAAnOBf-HUCf2fnXeBm5LBhsNKIIrZqVFh6

"EGSAF - NH Q4 2021 Lobbying Report (Draft)" History

- Document created by Liz Ingles (lingles@everytown.org) 2022-01-25 - 9:43:12 PM GMT- IP address: 71.183.212.7
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- Document e-signed by Mallory I Nugent (mnugent@everytown.org) Signature Date: 2022-01-26 - 3:26:44 PM GMT - Time Source: server- IP address: 174.242.64.187

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